

EXHIBIT A

EVIDENCE OF TRANSFER OF CLAIM

TO: THE DEBTOR AND THE BANKRUPTCY COURT

For value received, the adequacy and sufficiency of which are hereby acknowledged, Hain Capital Group, LLC ("Assignor") hereby unconditionally and irrevocably sells, transfers and assigns to Monarch Master Funding Ltd ("Assignee") all of its right, title, interest, claims and causes of action in and to, or arising under or in connection with, its administrative expense claim (as such term is defined in Section 101(5) of the U.S. Bankruptcy Code) of **\$514,159.08** associated with proof of claim number **747** against Circuit City Stores, Inc. (the "Debtor"), Chapter 11 Case No. 08-35653 United States Bankruptcy Court for the Eastern District of Virginia (the "Bankruptcy Court"), and any and all proofs of claim filed by Assignor with the Bankruptcy Court in respect of the foregoing claim.

Assignor hereby waives any objection to the transfer of the claim to Assignee on the books and records of the Debtor and the Bankruptcy Court, and hereby waives to the fullest extent permitted by law any notice or right to a hearing as may be imposed by Rule 3001 of the Federal Rules of Bankruptcy Procedure, the Bankruptcy Code, applicable local bankruptcy rules or applicable law. Assignor acknowledges and understands, and hereby stipulates, that an order of the Bankruptcy Court may be entered without further notice to Assignor transferring to Assignee the foregoing claim and recognizing the Assignee as the sole owner and holder of the claim. Assignor further directs the Debtor, the Bankruptcy Court and all other interested parties that all further notices relating to the claim, and all payments or distributions of money or property in respect of claim, shall be delivered or made to the Assignee.

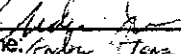
IN WITNESS WHEREOF, this EVIDENCE OF TRANSFER OF CLAIM IS EXECUTED
THIS 18th day of November, 2009.

MONARCH MASTER FUNDING LTD

HAIN CAPITAL GROUP, LLC

By: Monarch Alternative Capital LP
Its: Advisor

By: 
Name: **Robert G. Burns**
Title: **General Counsel**

By: 
Name: **Andrew J. Jones**
Title: **Assistant to the President**

United States Bankruptcy Court
Eastern District of Virginia
Richmond Division

Section 503(b)(9) Claim Request Form

**DEADLINE FOR
FILING 503(b)(9)
CLAIMS**
5:00 P.M. Pacific Time
December 19, 2008

Circuit City Stores, Inc. et al. Claims Processing c/o Kurtzman Carson Consultants LLC, 2335 Alaska Avenue, El Segundo, CA 90245 Case Nos. 08-35653 through 08-35670 Chapter 11 Jointly Administrated	
NOTE: Pursuant to an Order of the Bankruptcy Court in the above-referenced chapter 11 cases (see Docket No. 360), to have claims allowed as administrative expense under 11 U.S.C. § 503(b)(9), this form must be served upon Circuit City Stores, Inc. et al. Claims Processing, c/o Kurtzman Carson Consultants LLC, 2335 Alaska Avenue, El Segundo, CA 90245 by December 19, 2008, the Bar Date for Section 503(b)(9) claims in the above-referenced cases. The form may be submitted in person or by regular mail, overnight mail, or hand delivery. Facsimile, email or electronic submissions will not be accepted. Requests shall be deemed filed when actually received by Kurtzman Carson Consultants LLC.	
Name and Address of Creditor: <i>(file person or other entity to whom the debtor owes money or property)</i> THQ Inc. c/o Jehan Mangels, Butler & Mangero LLP Attn: Caroline R. Diang 1900 Avenue of the Stars, Seventh Floor Los Angeles, CA 90067 Telephone: 310-203-8060 Fax: 310-203-0587	Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input checked="" type="checkbox"/> Check box if you have made any demand(s) to reclaim goods sold to the debtor under 11 U.S.C. § 546(c). (attach copies of any such demand(s)) <input type="checkbox"/> Check box if you have transferred the rights of your claim to any third party. If so, please list name of transferee. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case.
Debtor against which claim is asserted. (Check one box below): <input checked="" type="checkbox"/> Circuit City Stores, Inc. (Tax ID No. 54-0493675) <input type="checkbox"/> Abbot Advertising, Inc. (Tax ID No. 54-1624159) <input type="checkbox"/> Circuit City Stores West Coast, Inc. (Tax ID No. 95-4460795) <input type="checkbox"/> CC Distribution Company of Virginia, Inc. (Tax ID No. 54-1712621) <input type="checkbox"/> Circuit City Properties, LLC (Tax ID No. 54-0753153) <input type="checkbox"/> Fantasy Designs, Inc. (Tax ID No. 52-1086796) <input type="checkbox"/> Venture International, Inc. (Tax ID No. 16-1671838) <input type="checkbox"/> Sky Venture Corporation (Tax ID No. 54-1760311) <input type="checkbox"/> Praha, Inc. (n/a) <input type="checkbox"/> XS Staff, LLC (Tax ID No. 54-0292163) <input type="checkbox"/> Kinzer Technology, LLC (Tax ID No. 54-0022157) <input type="checkbox"/> Circuit City Purchasing Company, LLC (Tax ID No. 20-0598170) <input type="checkbox"/> Orbyx Electronics, LLC (Tax ID No. 20-1203360) <input type="checkbox"/> InfoTAN, Inc. (Tax ID No. 75-2130875) <input type="checkbox"/> CC Aviation, LLC (Tax ID No. 20-5290441) <input type="checkbox"/> Courcheville, LLC (n/a) <input type="checkbox"/> Circuit City Stores PH, LLC (Tax ID No. 66-0695512) <input type="checkbox"/> May and MN, LLC (Tax ID No. 20-0898110)	Name and address where notices should be sent (if different from above): Telephone: Fax:
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 1441	Check here if this claim: <input type="checkbox"/> replaces <input type="checkbox"/> amends a previously filed claim dated:
1. BASIS FOR CLAIM: Goods received by the Debtor within 20 days before the date of commencement of the case. Value of Goods: \$514,159.08	
2. DATE OF SHIPMENT: see attachments METHOD OF SHIPMENT: see attachments DATE OF RECEIPT: see attachments NAME OF CARRIER: see attachments PLACE OF DELIVERY: see attachments	
3. TOTAL AMOUNT OF SECTION 503(b)(9) CLAIM: \$514,159.08 <input type="checkbox"/> Check the box if claim includes interest or other charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.	
4. BRIEF DESCRIPTION OF CLAIM: Goods received by the Debtor within 20 days before the date of commencement of the case. Describe goods sold: Video games (Attach support for your claim)	
5. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor. 6. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, or contracts. DO NOT SEND ORIGINAL DOCUMENTS. If the documents are not available, explain. If the documents are voluminous, attach a summary. Attachments must be printed on 8-1/2" by 11" paper. 7. DATE STAMPED COPY: To receive an acknowledgement of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this claim request form. 8. ORDINARY COURSE CERTIFICATION: By signing this claim request form, you are certifying that the goods for which payment is sought hereby, were sold to the debtor in the ordinary course of the debtor's business as required by 11 U.S.C. § 503(b)(9). Penalty for presenting fraudulent claim: Fines of up to \$500,000 or imprisonment for up to 5 years, or both, 18 U.S.C. §§ 152 and 3571.	FOR COURT USE ONLY
Date: 12/10/08	Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any): Sheryl K. Kintaco Vice President, Legal THQ Inc.

Creditor Data--THQ Inc

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Creditor Data for Claim Number 747

Creditor Name: THQ Inc		Date Claim Filed: 12/12/2008
Creditor Notice Name: Attn Caroline R Djang		KCC Claim #: 747
		Amend/Replace? No
Debtor Name: Circuit City Stores, Inc.		
Case Number: 08-35653		
Claim Nature: Admin Priority		Creditor Info Altered? N
Amount of Claim: \$514,159.08		
Schedule:		
Schedule Amt:		